



ARIZONA DEPARTMENT OF REAL ESTATE

COMPLAINT FORM

INV-800

FOR DEPARTMENT USE ONLY

Log No. _____

Case No. _____

INTRODUCTION

The Arizona Department of Real Estate, under the direction of the Real Estate Commissioner, enforces Arizona's Real Estate laws, Title 32 Chapter 20 of the Arizona Revised Statutes (A.R.S.). Part of that responsibility is investigating complaints from individuals who believe a licensee of the Department violated this law and/or the Real Estate Commissioner's Rules in the Arizona Administrative Code (A.A.C.).

ARS § 32-2108 requires that complaints filed with the Department be in writing and signed by the complainant. The complaint must allege conduct by a real estate licensee that violates Department laws and rules. Completing this form, signing it, and submitting it to the Investigations Division of the Department of Real Estate, triggers the investigative process.

A.R.S. § 41-1010 states: "...The name of the complainant shall be public record unless...the release...may result in substantial harm to any person." All complaints become a matter of public record when the review or investigation is concluded.

Filing this Complaint Form does not stop you from pursuing mediation or civil action against a real estate professional who may have damaged you financially. The Department's Investigators are available to discuss your complaint and are a good resource to help you identify other possible avenues of recourse.

ETHICS COMPLAINTS

You may also file a complaint with the Arizona Association of Realtors®. Approximately half of all real estate brokers and agents in Arizona are members of an Association of Realtors®. These members subscribe to a "Code of Ethics" which is a higher standard of professional conduct than that imposed by law. These associations conduct hearings on ethics complaints against their members.

This Department does not investigate violations of the "Code of Ethics."

PLEASE PRINT IN BLACK INK OR USE A TYPEWRITER

DETAILS ABOUT YOUR COMPLAINT

Attach separate 8-1/2 by 11-inch sheets of paper as necessary. Please include the following information.

IF YOU DO NOT PROVIDE SUFFICIENT INFORMATION WE WILL NOT BE ABLE TO INVESTIGATE YOUR COMPLAINT.

1. **Provide a written statement** of *who* did what, *what* happened, *when* it happened, *where* it happened and *how* it happened. *Who* witnessed it? *Be specific*. List events in chronological order. Was a document signed? Was a promise or representation made? If so, what was written or verbal? Use the actual words as closely as you can remember.
2. **Provide a complete copy of all supporting document(s)** as attachments. This includes contracts, closing documents, cancelled checks, receipts, title documents, letters, e-mails, etc.

Failure to provide any or all documents that support your position could delay the processing of your complaint.

If you develop additional information you may call the Investigations Division at 602.468.1414, extension 225 or 520 for assistance.

The Director of Investigations reviews all complaints and assigns each to an investigator. Investigators prioritize cases according to the severity of the issue, Department time-frame policies and available resources.

Type of Complaint

___ Failure to Disclose Information

___ Illegal Subdivision

___ Illegal Advertising

___ Property Management

___ Public Report Violation

___ Timeshare Violation

___ Cemetery Violation

___ Unlicensed Activity

___ Trust Account Violations

___ Other _____

Persons with disabilities who need this document in an alternate format should contact Business Services at 602.468.1414, extension 160, or IADA@re.state.az.us, to make their needs known.

LEGAL ACTION

Are you represented by an attorney in this matter? Yes ___ No ___ Have you filed a lawsuit? Yes ___ No ___

Attorney's name? _____

Law firm: _____

Address: _____

City _____ State _____ Zip _____ Phone Number: (____) _____

THIS COMPLAINT IS AGAINST THE FOLLOWING PERSON:

Please provide all requested information in the spaces provided. Please do not write "see attached."

☐ Mr. ☐ Ms. First Name: _____ Middle Initial _____ Last Name: _____

Address: _____

City _____ State _____ Zip _____ Phone Number: (____) _____

Company Name: _____

Designated Broker Name: _____

Address: _____

City _____ State _____ Zip _____ Phone Number: (____) _____

COMPLAINANT - YOUR NAME AND ADDRESS

☐ Mr. ☐ Ms. First Name: _____ Middle Initial _____ Last Name: _____

Address: _____

City _____ State _____ Zip _____

Mailing Address: _____

City _____ State _____ Zip _____

Home Phone: (____) _____ Work Phone (____) _____ e-mail _____

CERTIFICATION

Under penalty of perjury, I swear that this complaint, consisting of _____ pages, is true and accurate to the best of my knowledge.

Your Signature

Date

Americans with Disabilities Act

The Department of Real Estate complies with the Americans with Disabilities Act. Persons with disabilities may request reasonable accommodations such as interpreters, alternative formats or assistance with physical disability. Requests for accommodations must be made with 72 hours prior notice. If you require special accommodations, please contact the Department at 602.468.1414, extension 500.

Mail Completed Form & Attachments to: 2910 N. 44th Street, Suite 100
Phoenix, AZ 85018